Please type a plus sign (+) inside this box ->	Please	type a	plus sign	(+) inside	this box	\rightarrow	T
--	--------	--------	-----------	------------	----------	---------------	---

PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

			Attorney Docket Numb	ber F1TZ 3-1-1-1	
	ON F	FOR UTILITY OR	First Named Inventor	JOHN L. FITZ	
		PLICATION	COMPLET	TE IF KNOWN	
(37	CFF	R 1.63)	Application Number	. /	
2 5:		□ Dantontino	Filing Date	08-17-2001	
Declaration Submitted	OR	Declaration Submitted after Initial	Group Art Unit		
with Initial Filing		Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name		

As a below named inventor, I hereby declare that:
My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:
METHOD OF COATING OPTICAL DEVICE FACETS WITH DIFLECTRIC LAYER AND DEVICE MADE THERE FROM
(Title of the Invention)
the specification of which
is attached hereto
OR as United States Application Number or PCT International
was filed on (MM/DD/YYYY)
(if applicable).
Application Number and was amended on (MM/DD/YYYY)
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as
amended by any amendment specifically referred to above.
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-
in-part applications, material information which became available between the filing date of the prior application and the national or
PCT international filing date of the continuation-in-part application.
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's
certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's
certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.
Prior Foreign Application Foreign Filing Date Priority Certified Copy Attached?
Number(s) Country (MM/DD/YYYY) Not Claimed YES NO
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.
Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application
numbers are listed on a
supplemental priority data sheet
DTO/00/000 = M = L = J L = = J L
PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: 1 1	Customer Number r Bar Code Label		OR 🗵 C	оптеspondence address below
Name ATTN: PATENT	COUNSEL,	06C		
Address NATIONAL SEC	URITY MOEN	ocy		
Address 9800 SAVIAG	e road	STE 65	42-	
CHY FT MEADE		State	MD	ZIP 20755-6542
country USA	Telephon	e 301-698-	0287	Fax 301-688-0076
I hereby declare that all statements mad are believed to be true; and further that made are punishable by fine or imprisor validity of the application or any patent is	t these statements we oment, or both, under	re made with the k	nowledge that willful	false statements and the like so
NAME OF SOLE OR FIRST INV	ENTOR:	☐ A peti	tion has been file	d for this unsigned inventor
Given Name (first and middle [if any])	ny L	Family or Sur	Name Fit	_
Inventor's Signature	1.24			Date 15 August 2001
Residence: City Baltimore		State M	Country USA	Citizenship USA
Malling Address 8716 4	rights m	ill Road		•
Mailing Address	7			
City Baltimone	State M	ZIP	21244	Country () S A
NAME OF SECOND INVENTOR	:	☐ A peti	tion has been file	ed for this unsigned inventor
Given Name (first and middle [if any])	IEL Step	hen Family	Name	Kel
Inventor's Daniel S. M.	lenkel			Date 15 August 2001
Residence: City LaureL		State MD	Country USA	
Mailing Address 254 IBC	w shire	South		- , , .
Mailing Address			<u></u>	
city Love L	State M	ZIP	20724	Country USA
Additional inventors are being named	on the 1 suppleme	ntal Additional Inve	entor(s) sheet(s) PTO	/SB/02A attached hereto.

Please type a plus sign (+) inside this box	+
---	---

Please type a plus sign (+) inside this box

PTO/SB/02A (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 3 of 3

Name of Additional Joint Inventor, if an	ıy:		A petition has been file	ed for t	his unsigned inventor
Given Name (first and middle [if any])		Family Nam	ne or S	Surname
Scott C.			HORST		
Inventor's Signature					Date 8-15-01
Residence: City Syfesuice	State MD		Country USA		Citizenship USA
Mailing Address 1005 SITKA	SPRUCE				
Mailing Address					
CHY SYKESUILLE	State MD		ZIP 21784	Count	y USA
Name of Additional Joint Inventor, if an	y:		A petition has been filed	for th	is unsigned inventor
Given Name (first and middle [if any])		Family Nan	ne or S	Surname .
Harris			Turk		
Inventor's Jam (u	m				Date 8/15/01
Residence: City Paltimore	State M	0	Country USA		Citizenship USA
Mailing Address 1214 William	· St.				
Mailing Address					
city Saltimore	State M	<u>n</u>	ZIP 21230	Cou	intry USA
Name of Additional Joint Inventor, if ar	ıy:		A petition has been filed	for this	s unsigned inventor
Given Name (first and middle [if any])			Family I	Name	or Surname
Inventor's Signature	,				Date
Residence: City	State		Country		Citizenship
Malling Address		_			
Mailing Address					
City	State		7IP		ountry

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Kademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) ir	nside this box	$oldsymbol{H}$
--------------------------------	----------------	----------------

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR **AUTHORIZATION OF AGENT**

Application Number	
Filing Date	08-17-2001
First Named Inventor	JOHN L. FITZ
Title	METHOD OF COATING OPTICAL.
Group Art Unit	
Examiner Name	
Attorney Docket Number	FITZ 3-1-1-1

I hereby appoint	t:	
Practitione:	ers at Customer Number	Place Customer Number Bar Code Label here
	r(s) named below:	
	Name	Registration Number
	BERT D. MORELLI	37,398
51	TEPHEN M. BLOOR	39,612
<u> </u>	· · · · · · · · · · · · · · · · · · ·	
as my/our attorne	y(s) or agent(s) to prosecute the application ide nited States Patent and Trademark Office conn	entified above, and to transact all
	e correspondence address for the above-identifinentioned Customer Number.	о арриовион о.
OR		Place Customer
	at Customer Number	Number Bar Code Label here
OR		
Firm <i>or</i> Individual Nam	ne l	
Address		
Address		
City	s	state Zip
Country		
Telephone		ax
I am the:		
Applicant/l	Inventor.	
Assignee	of record of the entire interest. See 37 CFR 3.7	1.
Statement	t under 37 CFR 3.73(b) is enclosed. (Form PTO	NSB/96).
	SIGNATURE of Applicant or Assignee	of Record
Name	ROBERT D. MORELU	
Signatur	Mitautil Mills	
Date	08-17-200)	
NOTE: Signatures of all th	he inventors or assignees of record of the entire interest or	their representative(s) are required. Submit multiple
	gnature is required, see below*. forms are submitted.	
☑ *Total of	IOTHIS and Submitted.	

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/96 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S.Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: JOHN L. FITZ; DANIEL S. HINKEL; SCOTTC. HORST; HARRITORK
Application No./Patent No.:Filed/Issue Date:Filed/Issue Date:
Entitled: METHOD OF COATING OPTICAL DEVICE FACETS WITH DIELECTRIC LAYER
MATIONAL SECURITY AGENCY, a U.S. GOVERNMENT AGENCY
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)
states that it is:
1. the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is%
in the patent application/patent identified above by virtue of either:
A. 🕅 An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
OR
B. [] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:
1. From:
The document was recorded in the United States Patent and Trademark Office at Reel, Frame, or for which a copy thereof is attached.
2. From:To:
Reel, Frame, or for which a copy thereof is attached.
3. From:
3. From:To:To:To:
3. From:To:
3. From:
3. From:
3. From:
3. From:

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.